## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

s76967

LIAN & MIRSKY REALTY, INC.

FILED					
Apr 23 1997 8:00am					
Secretary of State					

Poncipal Plac	e of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·		
	S. HWY ONE, STE		s. HWY ON	E	
NOKIN	TALE DOE, PL 33		M BEACH	3. Date Incorporated or Qualified	3a. Date of Last Report
FLORIDA				08/30/1991	03/12/1996
2. Principal $\Omega$	Face of Business	2a. Mailing Address	<del>/</del>	08/30/1991 4. FEI Number	Applied For
21		26		65-0283511	Not Applicable
Swite, Apt	#, etc	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stati	e	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Z(p)	Country	7ip T	Country	8. This corporation has liability for in	
4	25	├ <b>─</b> 1 ` }	30	· · · · · · · · · · · · · · · · · · ·	Yes No
<u> </u>	9. Name and Address of Current			10. Name and Address of New Reg	
MID	CVV NODWA		81 Name		
MIRSKY, NORMA					
700 00 11.11 0112			82 Street Ac	dress (P.O. Box Number is Not Acceptab	e)
S A 83					
N P	ALM BCH FL 3340	8			
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-named co	orporation submits this statement for the pration's board of directors. I hereby accep	urpose of changing its registered
agant 🔼	registered agent, or both 25 the state of your familian with, and accept the coliga	or Florida. Such change was at tions of, Section 607.0505, Flor	umorizeo by the corpo rida Statutes.	ration's board of directors. I hereby accep	t the appointment as registered
SIGNATURE		Normal	Mirsky	4.	14-9-7
olawaran j	Socrature, typed or pented name of registered agen	Land tille if applicable (NOTE:	Registered Agent signature re-	tured when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TILEF	VP	☐ DELETE	1.1 TITLE		Change Addition
NAM!	GOULD, MYRA		1.2 NAME		
STREET ADDRESS		Y ONE STE A	1.3 STREET ADDRESS		
CITY - ST ZIP	700 US HIGHWAY NORTH PALM BE	ACH, FL 33408	1.4 CITY - ST - ZIP		
TATiF	P	☐ DELETE	2.1 TITLE		Change Addition
NAM <sub>t</sub>	MIRSKY, NORMA		2.2 NAME		
STREET ADDRESS	700 US HWY ONE	S-A	2.3 STREET ADORESS		
CCY-SE-Z	N PALM BCH, FL	33408	2 4 CITY-ST-ZIP		
T:11 H	•	DELETE	31 TITLE		Change Addition
MAN			3.2 NAME		4
STREET ADDRESS		*(	3.3 STREET ADDRESS		
City \$1,269		Dr. Fre	3.4. CITY-ST-7IP		
14TuF		☐ DELETE	4.1 TITLE		Change Addite
NAME			4. 2 NAME		
STREET AUDRESS			4.3 STREET ADDRESS		
01'Y 57 77		Detere	4 4 CITY - ST - 7iP		
Mel		[] DELETE	5 1 TITLE		Change Addition
NAM!			5 2 NAME		14,1103/92
S BH LA IIIII Se			5 3 STREET ADDRESS		11)4/24/17
01'Y 51 7-		DELETE	5 4 CITY - ST - ZIP	<del>90000215</del>	3#79 HANDER
111.1		ר"ו הנינונ	61 TITLE	90000215 -04/24/970101	4-023 Change
NAM)			6 2 NAME	***165.00	
S. PH 1 AUDRESS			6.3 STREET ADDRESS		
(017_51_Ze*     14   Lefts to re-	the control of the information to enhance	with this filing doce not qualify	for the exemption stat	ed in Section 119.07(3)(i), Florida Statutes	I further earlify that the
erlormatio n am acco	on ir a satg <del>al s</del> e this annual report op <del>a</del> c	coplementa: annual report is tru de receiver or trustee empowe	ue and accurate and the ered to execute this rep	at my signature shall have the same legal port as required by Chapter 607, Florida Si	effect as if made under path: the